



APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: **Regular**
Subject Matter:: **Utility**
CD-ROM or CD-R?:: **None**
Number of CD disks::
Number of copies of CDs::
Sequence submission?:: **None**
Computer Readable Form (CRF)?::
Number of copies of CRF::
Filed: **June 25, 2003**
Appln. No.: **10/602,714**
Title: **METHOD OF CLEAVING GaN/SAPPHIRE FOR
FORMING LASER MIRROR FACETS**
Attorney Docket Number:: **4249-0110P**
Request for Early Publication?:: **No**
Request for Non-Publication?:: **No**
Suggested Drawing Figure::
Total Drawing Sheets:: **7**
Small Entity?:: **No**
Petition Included?:: **No**
Petition Type::

APPLICANT INFORMATION

Applicant Authority Type:: **Inventor**
Primary Citizenship:: **India**
Country:: **India**
Status:: **Full Capacity**
Given Name:: **Ramam**

Middle Name::

Family Name:: AKKIPEDDI

City of Residence:: Singapore

State or Province of Residence:: Singapore

Country of Residence:: Singapore

Street of mailing address:: Block 443 Jurong West Avenue 1 #10-730

City of mailing address:: Singapore

State or Province of mailing address:: Singapore

Country of mailing address:: Singapore

Postal or Zip Code of mailing address:: 640443

Applicant Authority Type:: Inventor

Primary Citizenship:: Australia

Country:: Australia

Status:: Full Capacity

Given Name:: Zhongli

Middle Name::

Family Name:: LI

City of Residence:: Singapore

State or Province of Residence:: Singapore

Country of Residence:: Singapore

Street of mailing address:: Block 703 Choa Chu Kang St. 53, #10-60

City of mailing address:: Singapore

State or Province of mailing address:: Singapore

Country of mailing address:: Singapore

Postal or Zip Code of mailing address:: 630703

Applicant Authority Type:: Inventor

Primary Citizenship:: India

Country:: India
Status:: Full Capacity
Given Name:: Sudhiranjan
Middle Name::
Family Name:: TRIPATHY
City of Residence:: Singapore
State or Province of Residence:: Singapore
Country of Residence:: Singapore
Street of mailing address:: Block 117, Bukit Batok West Ave 6, #09-238

City of mailing address:: Singapore
State or Province of mailing address:: Singapore
Country of mailing address:: Singapore
Postal or Zip Code of mailing address:: 650117

Applicant Authority Type:: Inventor
Primary Citizenship:: Malaysia
Country:: Malaysia
Status:: Full Capacity
Given Name:: Soo
Middle Name:: Jin
Family Name:: CHUA
City of Residence:: Singapore
State or Province of Residence:: Singapore
Country of Residence:: Singapore
Street of mailing address:: 37 Cheng Soon Crescent

City of mailing address:: Singapore
State or Province of mailing address:: Singapore
Country of mailing address:: Singapore
Postal or Zip Code of mailing address:: 599909

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 02292

REPRESENTATIVE INFORMATION

Representative Customer Number::	02292
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DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application			

FOREIGN PRIORITY INFORMATION

Country::	Application Number::	Filing Date::	Priority Claimed::
Singapore	200203864-4	06/26/02	Yes

ASSIGNEE INFORMATION

Assignee Name:: Agency for Science, Technology and Research

Street of mailing address:: 20 Biopolis Way, #07-01 Centros

City of mailing address:: Singapore

State or Province of mailing address:: Singapore

Country of mailing address:: Singapore

Postal or Zip Code of mailing address:: 138668